

PLEASE MAIL OR BRING IN THE FOLLOWING  
INFORMATION TO CITY HALL WATER  
DEPARTMENT IN ORDER TO HAVE WATER  
SERVICE CONNECTED IN YOUR NAME.

**\*\*\*\*COPY OF PURCHASE OR RENTAL  
AGREEMENT**

**\*\*\*\*NOTARIZED COPY OF DRIVERS  
LICENSE**

**\*\*\*\*FILL OUT APPLICATION COMPLETELY**

**\*\*\*\*READ AND INITIAL BOTTOM OF  
APPLICATION**

**\*\*\*\*A \$100.00 DEPOSIT**

MAIL TO:

P.O. BOX 900  
LOCUST GROVE, GA 30248

IF OVERNIGHT:

3644 HWY 42  
LOCUST GROVE, GA 30248

QUESTIONS CALL:

770-957-5043

**City of locust grove**  
PO BOX 900, 3644 HWY 23/42  
LOCUST GROVE, GA 30248  
PHONE (770) 957-5043, FAX (770) 954-1223

**Application for water/sewer service**

DATE\_\_\_\_\_

NAME\_\_\_\_\_

ADDRESS OF SERVICE\_\_\_\_\_

BILLING ADDRESS OF SERVICE\_\_\_\_\_

HOME PHONE#\_\_\_\_\_ CELL PHONE#\_\_\_\_\_

SOCIAL SECURITY NUMBER\_\_\_\_\_

COPY OF PROOF OF PURCHASE ATTACHED: YES\_\_\_\_\_ NO\_\_\_\_\_

LIST NAMES OF ALL PEOPLE LIVING IN HOUSE\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**LANDLORD INFORMATION**

NAME OF PROPERTY OWNER\_\_\_\_\_

ADDRESS\_\_\_\_\_

HOME PHONE#\_\_\_\_\_ WORK PHONE#\_\_\_\_\_

HAVE YOU EVER HAD WATER/SEWER SERVICE IN LOCUST GROVE? YES\_\_\_\_\_ NO\_\_\_\_\_

ACCOUNT NAME\_\_\_\_\_

SERVICE ADDRESS\_\_\_\_\_

PLACE OF EMPLOYMENT\_\_\_\_\_

ADDRESS\_\_\_\_\_

TELEPHONE#\_\_\_\_\_

**NEAREST RELATIVE NOT LIVING WITH YOU**

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

TELEPHONE#\_\_\_\_\_

**DEPOSIT INFORMATION**

AMOUNT\_\_\_\_\_

DATE PAID\_\_\_\_\_

DATE OF SERVICE\_\_\_\_\_

WORK ORDER ISSUED\_\_\_\_\_

WORK ORDER NUMBER\_\_\_\_\_

\*\*\*\*\*

**BEFORE WE CAN TURN ON THE WATER PLEASE TURN OFF ALL WATER OUTLETS  
INCLUDING WASHER/DRYER CONNECTIONS AND REFRIGERATOR ICE MAKER**

\_\_\_\_\_  
**INITIALS**